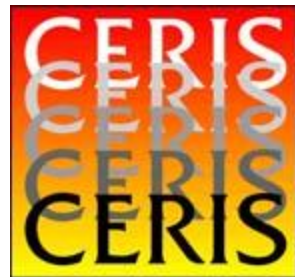


# Identifying Unmet Mental Health Needs in Immigrant and Refugee Communities in the Central West LHIN

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Special Thanks: David Colgan (CW LHIN), Marc Settino (York University)



# Research Issue

Background information

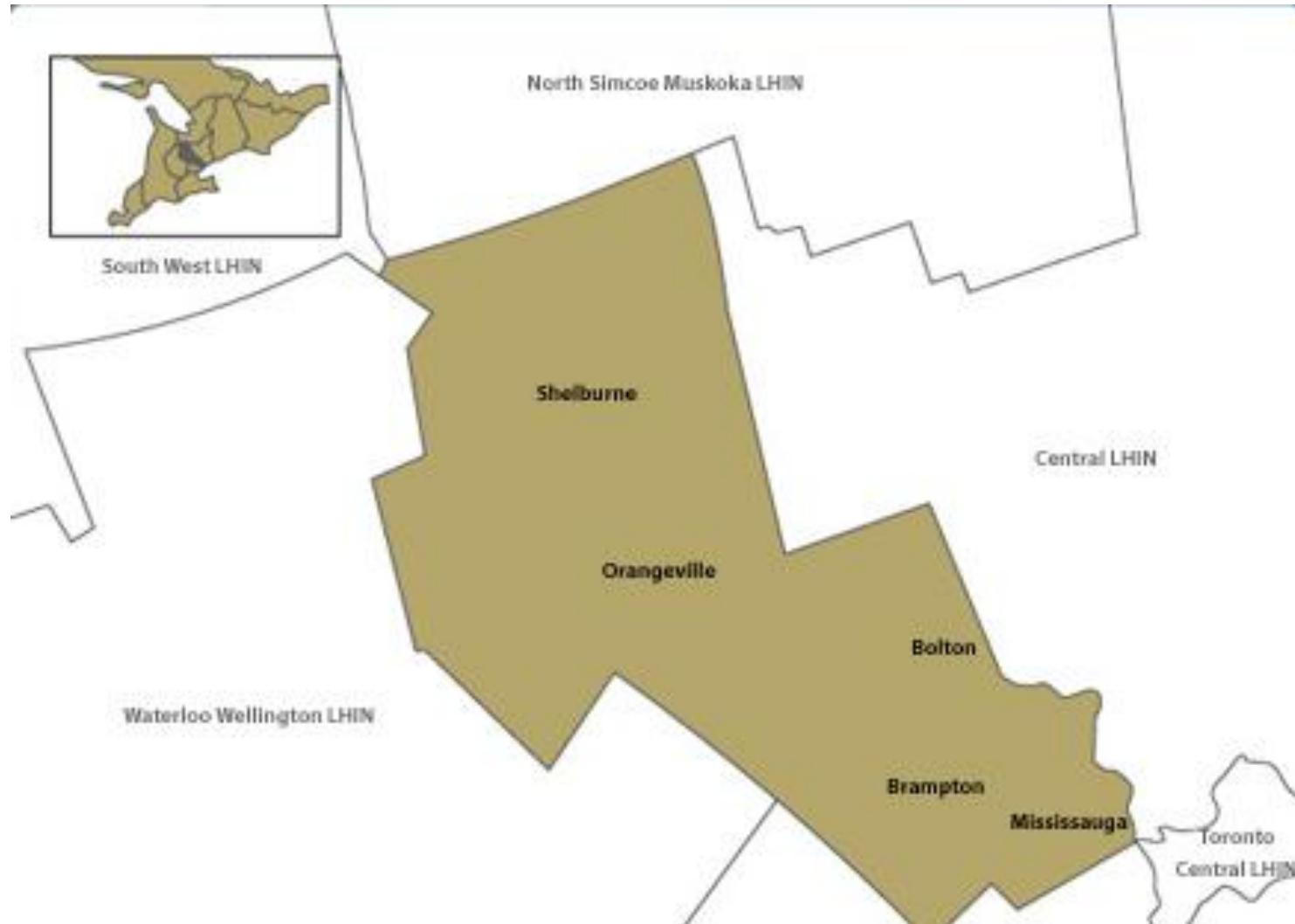
Canada and issues of equity and diversity

Immigration and refugee trends

Social Determinants of Health

Intersectionality

# Central West LHIN



# Research Question

What kinds of mental health services are available to immigrants and refugees in the Central West LHIN area?

- What are pathways and barriers to accessing these services?
- Which newcomers and sub population groups are being served?
- What are gaps and barriers faced by these diverse populations?

# Methods

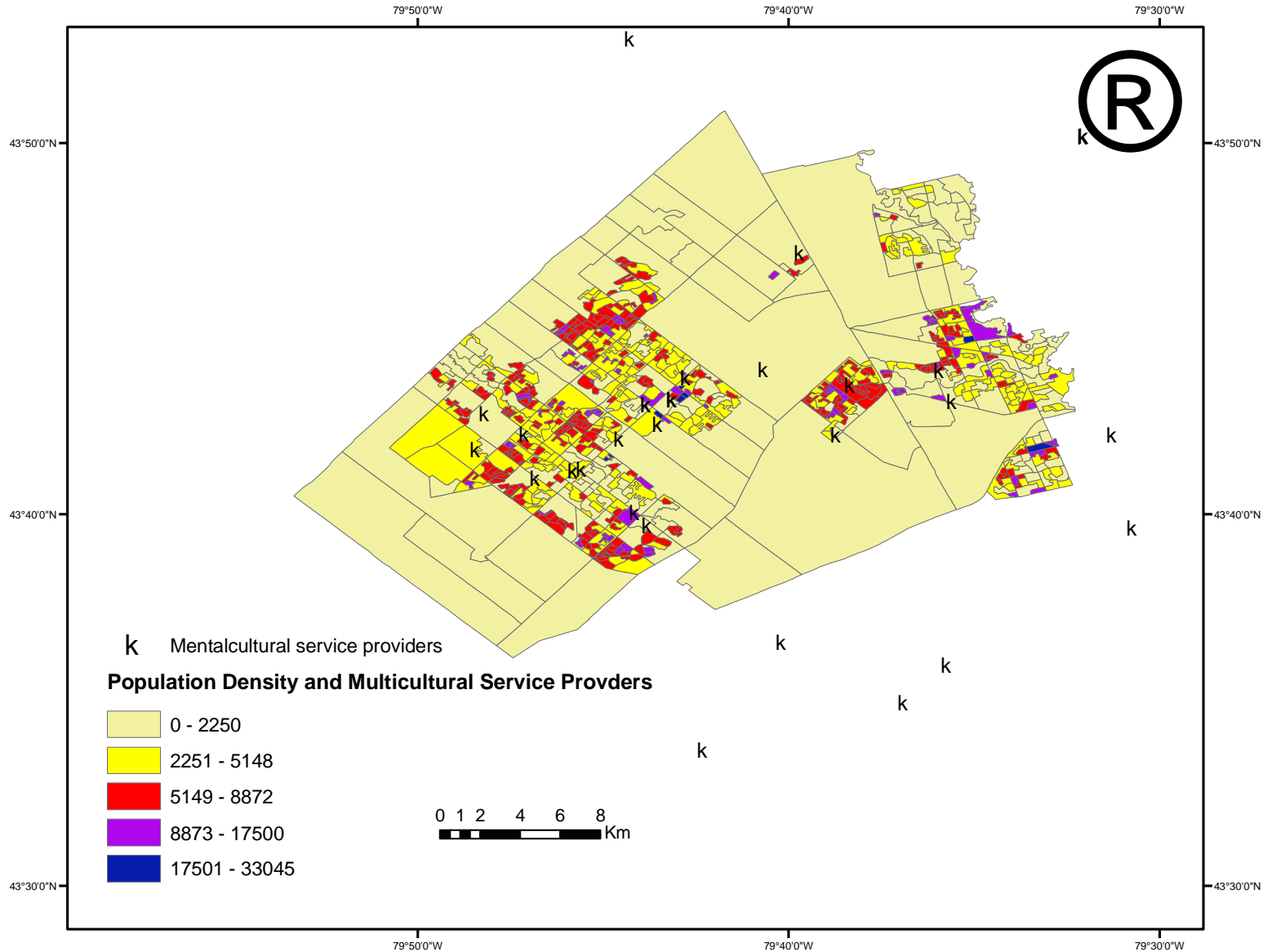
- Constructivist paradigm
- General descriptive approach
- Interviews for providers
- GIS description of services
- Focus group for community members
- Collaboration with partner agencies

# Preliminary Results - Interviews

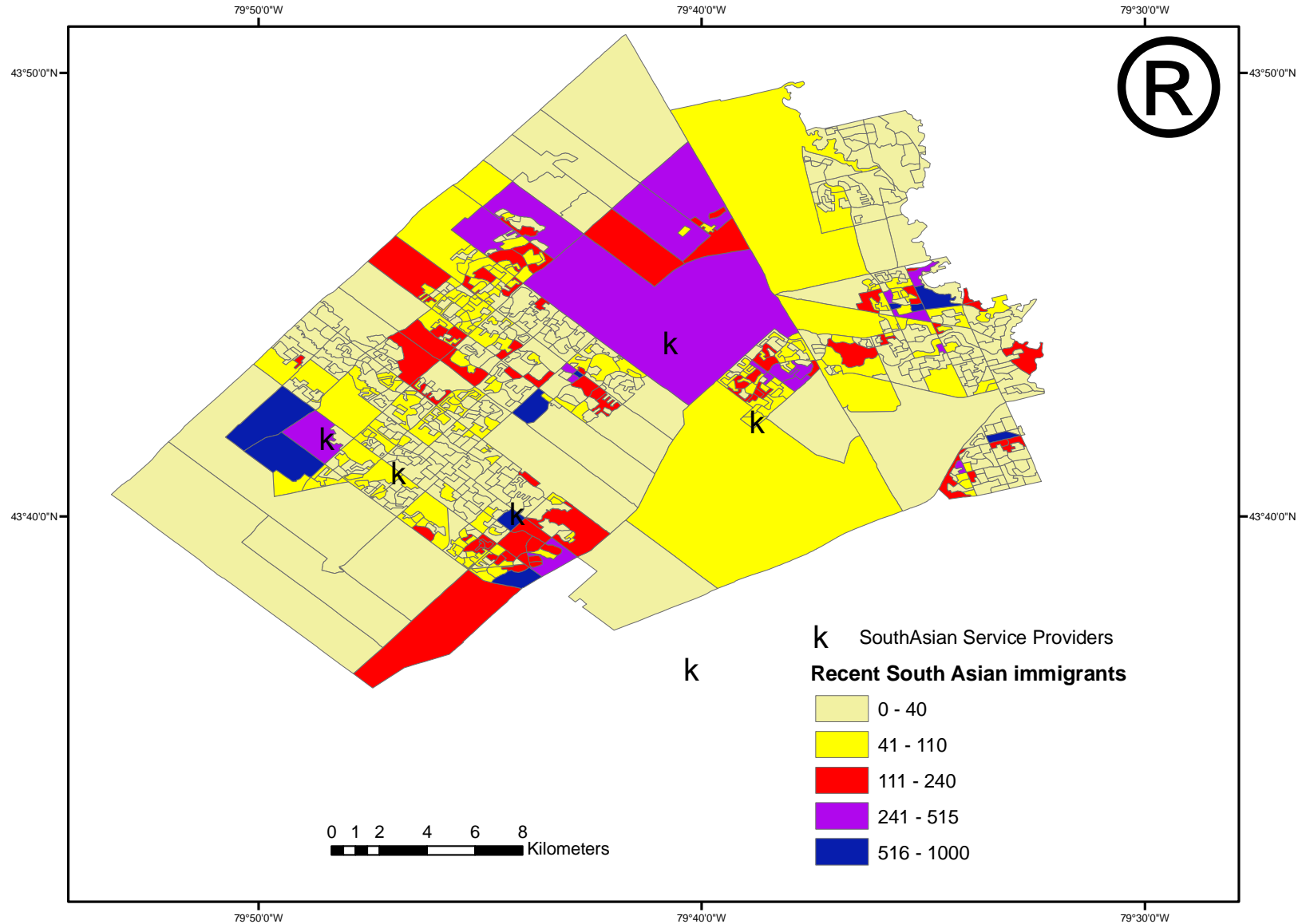
## Provider perspective:

- No specific services for LGBTQ community members
- No specific services for people with disabilities
- Few ethno-specific services (including not offering services in languages other than English)
- Services for African community are Christian, leaving African Muslim community residents with few options
- Little discussion of services targeting youth

# GIS Map Description – Population Density and Multicultural Service Providers

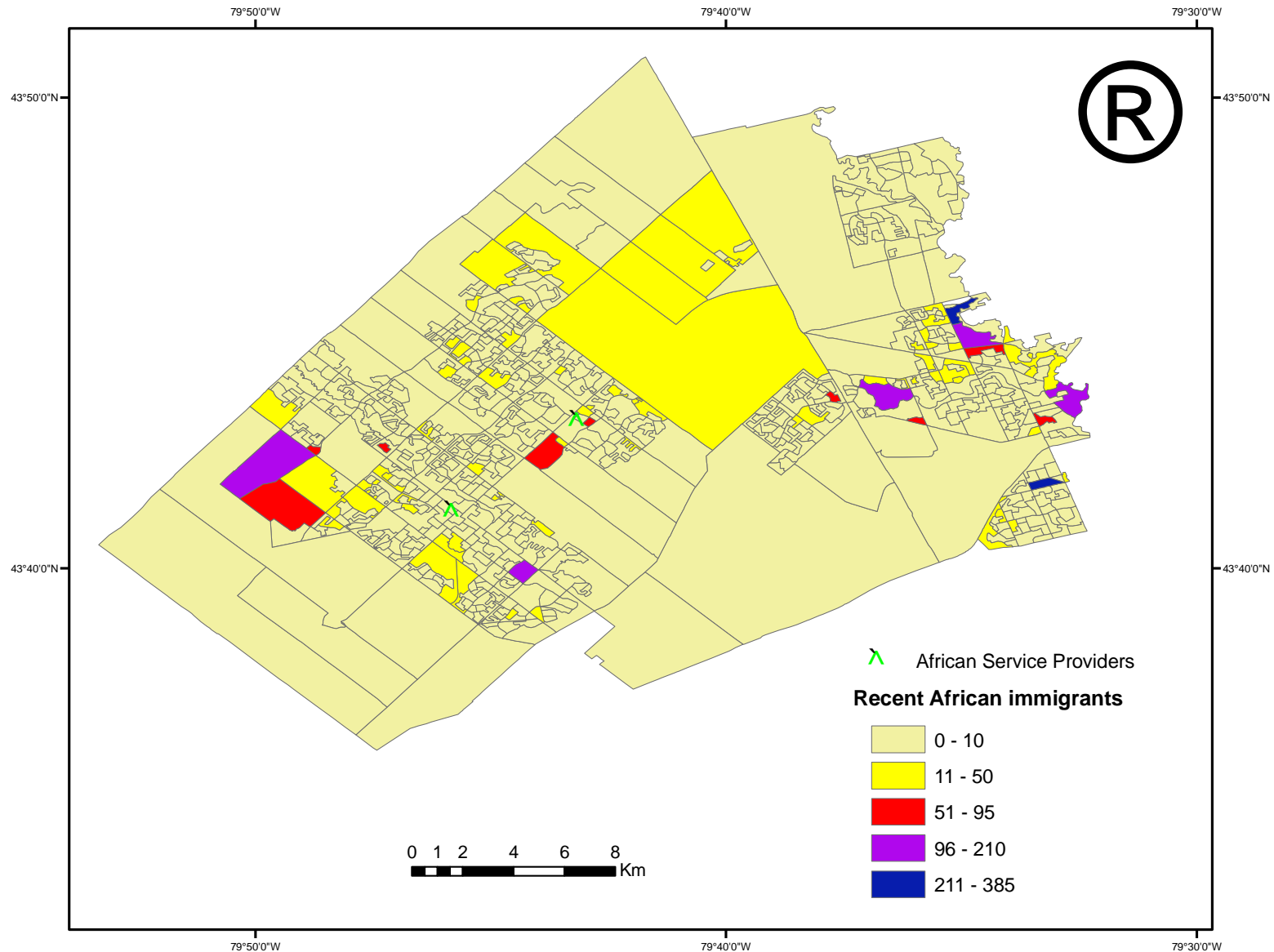


# GIS Map Description – Recent South Asian Immigrants and Service Providers





# GIS Map Description – Recent African Immigrants and Service Providers



# Preliminary Results – Focus Groups

## Community user perspective:

### Sources of psychological distress:

- Employment and Income
  - “You come and you are looking for a job, your wife is looking for a job. She will get the job first. You as a husband, you can’t get the job, you are so depressed, your morale is completely gone.” (Older African Male)
- Loss of social status
  - “Some Africans come, and they were in a high position in Africa. All of a sudden they come here and are reduced. Some of them become taxi drivers, work at McDonald’s. This affects them because their expectations were high.” (Older African Male)

# Preliminary Results – Focus Groups

- Social isolation
  - “Loneliness is the main problem in this country. We have no relatives, that is the main problem for us. We always feel the loneliness.” (Older South Asian Female)
- Family responsibility and expectations
  - “Parents have expectations, like you have to study this. Like Indian culture parents always focus on your career and sometimes it’s hard as an international student to study at University.” (Young South Asian Male)
- Changes in family roles and relationships
- Marital conflict
- Worrying about welfare of family members
- Social exclusion and discrimination
- Cultural differences

# Preliminary Results – Focus Groups

## Sources of Support:

- Religious Centres (Mosques, Temples): mostly mentioned by South Asian youth and seniors
- Community Centres: mostly mentioned by African seniors
- Hospitals and doctors
- Family support
- School guidance and counselling services
  
- Older South Asians knew of many services, but the youth knew of fewer
- Older African men and women knew the least, and older African men said they only heard of the centre through their wives and being recruited for this study

# Preliminary Results – Focus Groups

## Barriers to accessing services:

- Transportation and physical mobility issues
- Costs of programs, fees to take part
- Language
- Lack of knowledge about available services
  
- Older South Asian seniors who had no disposable income had problems being financially dependent on their children. They felt uncomfortable asking for money, and did not attempt to access services because of this
- African seniors said there were little services available
  - “The only services they offer are in the court where they train you on how to deal with your wife. The girl teaching you is from York University and has never been married. That is wrong.”  
(Older African Male)

# Preliminary Results – Focus Groups

## Facilitators and desired services:

- Information and awareness
- Volunteering
- Independence
- Education
- Good luck and blessings
  
- Counselling was discussed widely amongst African seniors, especially around family relationships. There is a preference for community based counselling with others in the African community
- Companionship was discussed widely amongst South Asians who wanted someone to talk to
  - “When seniors get together, they share their sorrows and joys with each other and support and guide each other.” (Older South Asian Female)

# Considerations

- Strengths
  - Multiple perspectives
  - Explore rich nuances
  - Voice to community members
- Limitations
  - Small sample size
  - Limited generalizability
  - Contrived environment
  - LHIN boundary issues
- Ensuring Rigour
  - Triangulation
  - Collaboration

# Future Implications

- Project provides rich and nuanced description of services available
- Data product may inform newcomers and agencies about gaps in service provision
- Project aligns with CW LHIN priority of being responsive to cultural diversity in mental health
- Health services planning will need to consider intersectionality and the social location of users when delivering care